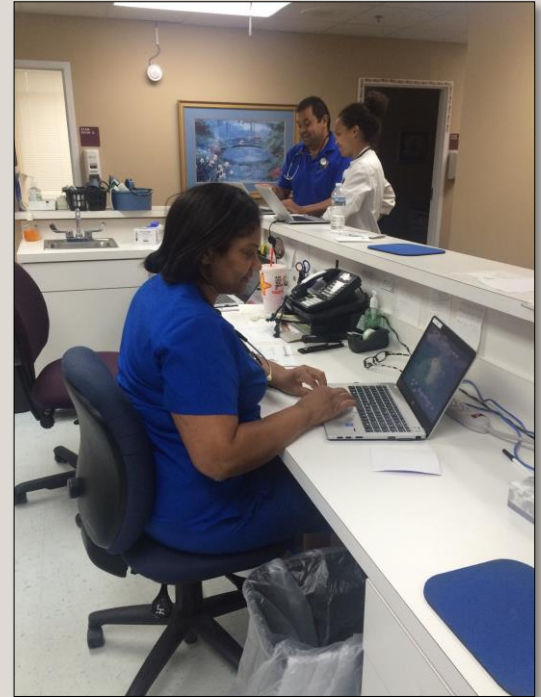


# Local Health Departments & FQHC's

*Tri County Partnership Success*

*Crystal Bell BA, MPA*

*Community Health Educator*



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443-523-1760

# Three Lower Counties Community Services (TLCCS)

## Eastern Shore Tri County Region

- **Wicomico County=102,370**
- **Worcester County=51,540**
- **Somerset County=25,768**

**(179,678 )Tri County Residents**

TLCCS serves 44,552 distinct patients out of all three counties combined

<http://www.census.gov>

2010 census data:

Population estimates, July 1, 2015

TLCCS offers health care in Adult Medicine, Pediatrics, OB/GYN, Mental Health and Dental.

- Wicomico County facilities offers Adult Medicine, Pediatrics, Mental Health and OB/GYN
- Worcester County facilities currently provides health care in Pediatrics and Adult Medicine
- Somerset County facilities offer Adult Medicine, Pediatrics, Mental Health, OB/GYN, and Dental



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## Partnerships between Federally Qualified Health Centers and Local Health Departments

- Community Engagement
- Existing Partnerships
- Local Health Improvement Coalition (LHIC)

In our small county partnerships are necessary to maximize our resources, reduce duplication of efforts, and improve quality, efficiency, and accessibility of health care services in our rural region.



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## Relationship Sustainability In Support of NDPP

- Effective communication/Continued support
- Clear and concise understanding of NDPP
- Face-to-face office visits/Outreach
- Quarterly report updates/Progress reports
- Creation of Bi-directional referral system
- Patient follow up letters
- Effective program results
- Positive feedback

**IT'S ALL ABOUT TRUST  
&  
COMMUNICATION!**



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443-523-1760

# Partnership and Support



- LHD'S will continue to work closely with our FQHC's
- Ensure ALL efforts are aligned to meet the goals set forth as a part of our partnership with 1422
- Continue partnerships and support for other collaborative programs



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## NDPP Referral System between LHD's and FQHC's

- Patients that have risk factors for developing diabetes (A1c, family history, history of gestational diabetes, etc.—Are flagged in the HER system
- Upon office visit patients that have been identified as a result of contributing risk factors are screened using the tools LHD's provided (CDC Risk Scorecard)
- The nurse or provider gives the patient information, such as flyers, brochures, or website printouts that highlight corresponding county class information
- If the patient agrees, TLCCS has patient sign a HIPPA release and referral is sent through EHR, via fax to the appropriate county w/ provider signature



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443-523-1760



# Diabetes Prevention Program

- Eat Better
- Move More
- Live Well

Public Health

Know your numbers. Screen today!

## Prediabetes Screening Test



### COULD YOU HAVE PREDIABETES?

Prediabetes means your blood glucose (sugar) is higher than normal, but not yet diabetes. Diabetes is a serious disease that can cause heart attack, stroke, blindness, kidney failure, or loss of feet or legs. Type 2 diabetes can be delayed or prevented in people with prediabetes through effective lifestyle programs. Take the first step. Find out your risk for prediabetes.

#### TAKE THE TEST - KNOW YOUR SCORE!

Answer these seven simple questions. For each "Yes" answer, add the number of points listed. All "No" answers are 0 points.

Yes	No	
1	0	Are you a woman who has had a baby weighing more than 9 pounds at birth?
1	0	Do you have a sister or brother with diabetes?
1	0	Do you have a parent with diabetes?
5	0	Find your height on the chart on the back of this page. Do you weigh as much as or more than the weight listed for your height?
5	0	Are you younger than 65 years of age and get little or no exercise in a typical day?
5	0	Are you between 45 and 64 years of age?
9	0	Are you 65 years of age or older?

Add your score and check the back of this page to see what it means.

### AT-RISK WEIGHT CHART

Height	Weight Pounds	Height	Weight Pounds
4'10"	129	5'8"	177
4'11"	133	5'9"	182
5'0"	138	5'10"	188
5'1"	143	5'11"	193
5'2"	147	6'0"	199
5'3"	152	6'1"	204
5'4"	157	6'2"	210
5'5"	162	6'3"	216
5'6"	167	6'4"	221
5'7"	172		

#### IF YOUR SCORE IS 3 TO 8 POINTS

This means your risk is probably low for having prediabetes now. Keep your risk low. If you're overweight, lose weight. Be active most days, and don't use tobacco. Eat low-fat meals with fruits, vegetables, and whole grain foods. If you have high cholesterol or high blood pressure, talk to your health care provider about your risk for type 2 diabetes.

#### IF YOUR SCORE IS 9 OR MORE POINTS

This means your risk is high for having prediabetes now. Please make an appointment with your health care provider soon, and enroll in a FREE Diabetes Prevention Program near you today!

#### HOW CAN I GET TESTED FOR PREDIABETES?

**Individual or group health insurance:** See your health care provider. If you don't have a provider, ask your insurance company about providers who take your insurance. Deductibles and copays may apply.

**Medicaid:** See your health care provider. If you don't have a provider, contact a state Medicaid office or contact your local health department.

**Medicare:** See your health care provider. Medicare will pay the cost of testing if the provider has a reason for testing. If you don't have a provider, contact you local health department.

**No insurance:** Contact your local health department for more information about where you could be tested or call your local health clinic.

**Call your local health department to see if you qualify today!**

Somerset County Health Department (443) 523-1760

Wicomico County Health Department (410) 334-3480

Worcester County Health Department (410) 632-0056



One out of three American adults has prediabetes, and most of them do not know it. Having prediabetes means your blood glucose (sugar) level is higher than normal but not high enough to be diagnosed as diabetes. This raises your risk of type 2 diabetes, heart disease, and stroke. Without weight loss or moderate physical activity, many people with prediabetes will develop type 2 diabetes within 3 years. Type 2 diabetes is a serious condition that can lead to health issues such as heart attack; stroke; blindness; kidney failure; or loss of toes, feet, or legs. The lifestyle changes you make in the Diabetes Prevention Program will help you prevent or delay type 2 diabetes!

**You may have prediabetes and be at risk for Type 2 diabetes if you:**

- Are 45 years of age or older
- Are overweight
- Have a family history of type 2 diabetes
- Are physically active fewer than 3 times per week
- Ever had diabetes while pregnant (gestational diabetes) or gave birth to a baby that weighed more than 9 pounds

**Make a change – Start today!** If you think you may be at risk for type 2 diabetes: Talk to your healthcare provider and have them complete this recommendation form and Submit completed form prior to program participation.

**If you don't have a health care provider, call us to find out if you qualify for the program.**

» Take the "Could You Have Prediabetes?" online quiz at:

<http://www.cdc.gov/diabetes/prevention/pdf/prediabetestest.pdf>. If your score shows you are at high risk for prediabetes, talk to your health care provider about starting our program today! Or contact your local Health Department for more information.

**Recommendation Form Diabetes Prevention Program**

**This is a recommendation for an adult patient to participate in the Diabetes Prevention Program. Please make a copy for your records and fax completed form:**

- Wicomico County Health Department (410) 548-5184
- Somerset County Health Department (410) 651-4083
- Worcester County Health Department (410) 632-0080

\_\_\_\_\_  
(First Name, Last Name)      (D.O.B)      (MI)      (Contact Number)

Is recommended for enrollment in the **Diabetes Prevention Program** based on the following eligibility criteria:

- ☒ Primary Insurance: Medicaid
- ☒ 18 years or older AND has a BMI  $\geq 24$  kg/m<sup>2</sup> ( $\geq 22$  if Asian)
- ☒ Patient has a diagnosis of prediabetes or GDM based on (check one or more)
  - Fasting blood glucose (range 100-125 mg/dl)
  - 2-hour glucose (range 140-199 mg/dl)
  - 11bA1c (range 5.7-6.4)
  - Previous GDM (may be self-reported)

\_\_\_\_\_  
Provider Signature

\_\_\_\_\_  
Date



**Starting September 12 at 5pm**

- ♦ Learn how to eat more healthy and be more active
- ♦ Lose weight
- ♦ Reduce your diabetes risk
- ♦ FREE 16 week program
- ♦ Change your life!

**Princess Anne Library**  
**11767 Beachwood St. Princess Anne, MD 21853**

**Must register in advance and be at least 18 yrs. of age.**

**Call Today! 443-523-1760**

*National Diabetes Prevention Program, Center for Disease Control & Prevention  
Sponsored by the Somerset County Health Department*





Calendar - Outlook Web

athenaCollector v16.7 MD

Hospital Follow-up Disch

Maryland Medicaid Health

Not Available - Calendar

Diabetes Prevention and E

TRS :: Transamerica Retire

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Athenahealth, Inc. [US]


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athenaNet

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Order Group

Today | Yen Dang, PHARMD ☰

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Problems

HISTORICAL (50) +

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Patient risk (1)

Risk score 0.263 | Gap 0.118 >>

📋

abnormal glucose level

💊

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blood glucose abnormal

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oppositional defiant disorder

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chronic anxiety

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asthma

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mild persistent

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lupus erythematosus

📋

generalized anxiety disorder

📋

gastroesophageal reflux disease

📋

morbid obesity

📋

ankle edema

📋

low back pain

📋

Alpha-1-antitrypsin deficiency

📋

attention deficit hyperactivity disorder, combined type

📋

attention deficit hyperactivity disorder, predominantly inattentive type

VIEW CARE EPISODES AND TRACKING

👤

Orders

+ DIAGNOSES & ORDERS

Sign Orders

Ordering Provider

Yen H Dang, PHARMD ▾

impaired fasting glycaemia

Assessment

🔄 + ✕

community referral

✕

Send

07-21-2016 📅

☐ STAT

Alarm

4 weeks ▾

08-18-2016

Send to

+ RECEIVER

☐ Documentation only

☐ Include summary of care record

Urgency

Reason for Referral

Diabetes Prevention Program

Evaluate & Treat

Anesthesia

▾

Start Date

📅

Procedure Code

PRINT

VIEW MORE

Follow Up

+ RETURN TO OFFICE

17 of 33 Tasks

TLC\_PA\_Adult ▾

0 1 34 tasks

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WBK PCMH FU July....docx

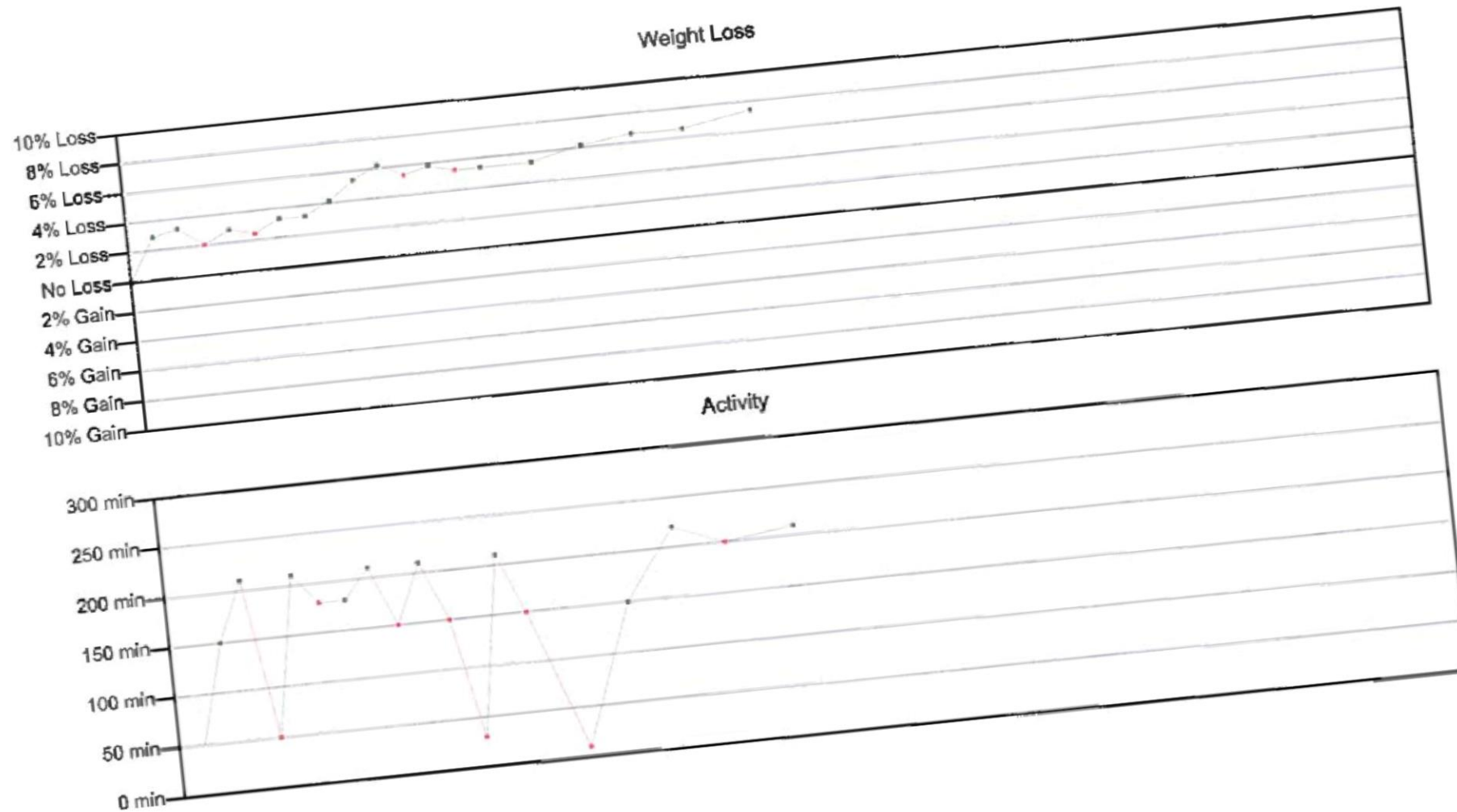
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Thu Aug 11 12:57 PM



## CDC Diabetes Prevention Recognition Program



Maryland Workshop Wizard



## SOMERSET COUNTY HEALTH DEPARTMENT

7920 Crisfield Hwy, Westover, MD 21871

Craig Stofko, M.Ed., LCADC  
Health Officer

Phone: 443-523-1700  
Toll Free: 1-800-363-8090  
Fax: 410-651-5600

TO: Health Care Provider

FROM: Crystal Bell, Community Health Educator/Certified Lifestyle Coach

DATE: September 7, 2016

RE: Somerset County Diabetes Prevention Program

### Patient Enrollment Summary for:

**Patient Name:**

**Date of Birth:**

You recently referred the above-named patient to the 16-week Somerset County Diabetes Prevention Program. This letter is to inform you that the patient has successfully enrolled in the program. Please note that you will be informed when the patient is discharged from the program, either by dropping out or by successfully completing the program. At that time, we will also provide the patient with a discharge summary which he or she may share with you.

A patient who either does not complete the program or who does not wish to participate at the time of referral may request to participate in a future session; however, you will need to provide a new referral/recommendation form at that time.

If you have any questions or need additional information, feel free to contact me at 443-523-1760 or [crystal.bell@maryland.gov](mailto:crystal.bell@maryland.gov). Thank you for referring your patient.

Thank You,

Crystal bell  
Community Health Educator/Certified Lifestyle Coach



## SOMERSET COUNTY HEALTH DEPARTMENT

7920 Crisfield Hwy, Westover, MD 21871

Craig Stofko, M.Ed., LCADC  
Health Officer

Phone: 443-523-1700  
Toll Free: 1-800-363-8090  
Fax: 410-651-5600

TO: Health Care Provider

FROM: Crystal Bell, Community Health Educator/Certified Lifestyle Coach

DATE: September 7, 2016

RE: Somerset County Diabetes Prevention Program

Patient Discharge Summary

You recently referred the below-named patient to the 16-week Somerset County Diabetes Prevention Program. This is a summary of that patient's participation:

Patient Name	
Date of Birth	
Number of Sessions Attended	0
Program Status: Client would like to enroll in future class as time permits. SCHD will notify her when the next class begins.	<input type="checkbox"/> Successfully completed program <input type="checkbox"/> Enrolled but never started the program <input type="checkbox"/> Quit program as of session on _____, i.e., dropped out of program (status unknown) <input type="checkbox"/> Refused referral and never started program

A patient who either does not complete the program or who does not wish to participate at the time of referral may request to participate in a future session; however, you will need to provide a new referral/recommendation form at that time.

If you have any questions or need additional information, feel free to contact me at 443-523-1760 or [crystal.bell@maryland.gov](mailto:crystal.bell@maryland.gov). Thank you for referring your patient.

Thank You,



## Additional Strategies for Sustaining Evidence-Based Community Programs



- Increase and build upon sufficient local capacity and pre-existing resources
- Explore sustainable funding sources
- Continue building support in efforts to expand (NDPP) program within communities



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**Thank You!**



***Crystal Bell BA, MPA***

***Community Health Educator***

***Somerset County Health Department***

***443-523-1760***

***Crystal.Bell@maryland.gov***



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